FOR INSTRUCTIONS, SEE BACK OF FORM		FORM
DISCLOSURE SUMMARY F	DR-2 DISCLOSURE	
COMMITTEE NAME (Must be same as on Statement of	(Rev. 01/2001) REPORT	
Worth County Republican Central Commi		For Office Use Only Comm. # 100
		Comm. # 9199 5 5
IMPORTANT: Indicate type of committee you are reporting for:	• 🔼 -	Indexed MM 5
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate		Audited
(5) County FAC (6) Ballot Issue/Franchise Committee (7) Count (8) Support State of Candidates	your contrat commands	Computer
CANDIDATE COMMITTIES ONLY:		3 2
Candidate Name	Political Party	
	Posices Faity	6: 53
	Problem Planets of Llevin	53
Office Sought	District (if Senate or House	9)
	•	
4.4)	641-324-27	
dig Kenjon Liz Kenis		78-Home 1/13/2009 DATE SIGNED
SIGNATURE OF TREASURER (or person filing this re	port) TELEPHONE	DATE SIGNAL
Routine Penaities Due For	Late Filed Reports Range	from \$20 to \$800
SEN INSTRUCTIONS ON BACK AND COMPLETE		
AM FILING A 1/19/2009		ECTION /(2)NON-ELECTION YEAR.
(report date)	(report date) Indic	
CHECK IF AMENDMENT TO REPORT DATED	·	Local Committees, enter Date of Election
Check if this is final (termination) report and attach No	tice of Dissolution Form DR-3.	County & Local Committees, enter County in which Election is held
(You must continue to file reports until a Notice	of Dissolution is filed.)	
etatem.	ENT OF CASH ON HAND	
,		
CASH ON HAND at the beginning of the reporting period by the committee. This amount MUST be the sa	, (This is the total of all monies he	vi
of the last reporting period, or must be zero if the	is is first report fled.)	\$ 669.92
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach S		w)
Schedule F: Loans Received total (Attach Sche		_
Schedule H: Total Sales of Campaign Property		
1		
(Schedule H applies to Candidates)		1841 A
	~ ~	TAL\$ 669.92
SUBTRACT TOTAL MONEY SPENT THIS PER		12/31/08 172.80 + .50 SCBAN
Schedule B: Expenditures total (Attach Schedu		Jelow)
Schedule F: Loan Repayments total (Attach So	hedule F)	0
CASH ON HAND at the end of this reporting period (if fin	al report, balance must	SHOULD HAVE B
be zero) (Attach DR-3)		\$ 497.12 \$496.62
		ŧ
***UNPAID BILLS (From Schedule D - Attach Schedule D	/)	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach		
**OUTSTANDING LOANS (From Schedule F - Attach Sc	chedule F)	narhtafdeanna \$
CANDIDATE COMMITTEES ONLY:		
CARDIDATE COMMITTEES ONET.		•
CONSULTANT BREAKDOWN (Schedule G Attached?)		YESNO _

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
WORTH COUNTY REPUBLICAN CENTRAL COMMITTEE

SCHEDULE A (Rev. 02/96)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RÉCEIVED
1/14/09	ID# CK#	GASKILL FOR SENATE		\$ 200.00
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			•
	ID#			
	CK#			
	ID#			
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· · · · · · · · · · · · · · · · · · ·	ID#			
	CK#			
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	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	<u> </u>		SUB-TOTAL	s 200.00
		TOTAL (if last pa	ge of this schedule)	\$ 200.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 02/96)	MONETARY EXPENDITURES	
	CK THIS BOX IF INDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

WORTH COUNTY REPUBLICAN CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE		PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMQUNT EXPENDED	
12/31/09	ID# CK#	BANK CHARGE	SERVICE CHC = \$.47 SALES TAX = \$.03	()	\$.50 ·	
	ID#					
	CK#			()		
	ID#					
•	CK#			()		
	ID#		•••			
	CK#			. ()		
	ID#			,		
	CK#			()		
	ID#					
	CK#	•		()		
	ID#	<u> </u>	······································			
	CK#	t		()		
		:		SUB-TOTAL	\$,50	
٠.			TOTAL (if last	page of this schedule)	\$.50	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:

(1) campaign purposes,

(2) constituency expenses, and

(3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page 1 of 1 (for Schedule B)